

Form CPF M 102: Campaign Finance Report Municipal Form

2021 APR -6 PM 2: | 4Office of Campaign and Political Finance

UI Massachuseus	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 3/1	2021 Ending Date: 4/5/2021
Type of Report: (Check one)	
	30 day after election year-end report dissolution
ELIZABETH BEMPSEY LEE	VOTE LIZ LEE COMMITTEE
Candidate Full Name (if applicable)	Committee Name
SCHOOL COMMITTEE NEEDHAM	Name of Committee Treasurer
42 BLACKSMITH DRIVE NEEDHAM	42 BLACKSMITH DRIVE, WEEDHAM
Residential Address	Committee Mailing Address
E-mail: VOTELIZLEE GMAIL, COM	E-mail: EMMANAVALES 79 CGMAIL CM
Phone # (optional):	Phone # (optional): 617 \$8 \$ 0566
SUMMARY BALANCI	E INFORMATION:
Line 1: Ending Balance from previous report	\$0
Line 2: Total receipts this period (page 3, line 11)	\$750
Line 3: Subtotal (line 1 plus line 2)	\$750
Line 4: Total expenditures this period (page 5, line	\$27.70
Line 5: Ending Balance (line 3 minus line 4)	\$722.30
Line 6: Total in-kind contributions this period (page	ge 6) \$430
Line 7: Total (all) outstanding liabilities (page 7)	\$1017-44
Line 8: Name of bank(s) used: SANTANOT	=L
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of finance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury:	ontributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	only)
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the lactivity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting I	ordance with the requirements of M.G.L. C. 33. I have not received any conditionalists,
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the infinance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	in-kind contributions and liabilities for this reporting period and represents the candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Candidate's signature)

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar ear. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the ccupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to eport all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/16/21	EMMA NAVALES 82 DEERFIELD ROAD	\$50	
3/16/21	ELIZABETH LEE 42 BLACKSMITH DR	\$50	
3/17/21	ANNE DEMPSEY 184 ROGERSAVE, W STRINGHEL	\$50	
3/18/21	JODI ROONEY 617 CENTRAL AVE	\$50	
3/19/21	MYRNA ZAKARIAN 34 BLACKSMITH DR	\$50	
3/23/21	KATHLEEN DEMAYO 60 LEWS ST	\$150	
3/24/21	RACHEL TEDRAKE 7HOLLOW RIDGE RD	\$50	
3/27/21	WILLIAM DEMPSEY 14 ROGERSANE, NORTHAMPTON	450	
3/30/21	JENNIFER ADLER 35 MAYFLOWER RD	150	
3/31/21	JUN TU 40 HIGH ROCKST	\$100	
ine 9: Total Rece	ipts over \$50 (or listed above)	\$650	
ine 10: Total Reco	eipts \$50 and under* (not listed above)	0012	
	RECEIPTS IN THE PERIOD	\$750	Enter on page 1, line 2

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
			, , , , , , , , , , , , , , , , , , , ,
ne 9: Total Receipt	ts over \$50 (or listed above)		
ne 10: Total Receip	ats \$50 and under* (not listed above)		
ne 11: TOTAL RE	CEIPTS IN THE PERIOD	←	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep stailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, om committee records, and reported on line 13.

A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to port all expenditures. Please include your committee name and a page number on each page.)

	To Whom Paid	Address Purpose of Exp	enditure Amount
Date Paid	(alphabetical listing)	Audress 1 ai pose of 12Ap	Chaitaic
			111
===			
		Line 12: Total Expenditures over \$50 (or listed ab	ove) \$O
		Line 13: Total Expenditures \$50 and under* (not li	sted above) \$27.7
			<u> </u>
	Enter on page 1, line 4	er, include them in line 12. Line 13 should include only the	<u> </u>

If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized Page 4 bove.

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date 1 and	(arphabetical nating)	Address	1 to pose of Expenditure	Amoun
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and u	nder* (not listed above)	
	P	Line 14. TOTAL EVDENDITE	IDEC IN THE DEDICE	
		Line 14: TOTAL EXPENDITU	ould include only those expenditures	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

lease itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be dded together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
3/1/2-1	HILARY BRUEL	87 THORNTON RD	25x LAWN SIGNS	\$107.50
3/1/21	ALISA SKATRUD	49 SARGENT ST	25x LAWN SIGNS	\$107.50
3/1/21	JODI ROONEY	617 CENTRALANE	25x LAWNSIGNS	\$107.50
3/1/21	EMMA NAVALEJ	82 DEERFIELD RD	29x LAWN SIGNU	52.00P
		Line 15: In-Kind Contribution		\$430.
			\$50 & under (not listed above)	9120
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C		\$430

If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address f the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as we as those liabilities incurred during this reporting period.

Date Incurred To Whom Due		Address	Purpose	Amount	
3/14/21	JODI RODNEY	67 CENTRALAVE	SOX LAWN SGNS	\$300,00	
3/24/21	ELIZABETH LEE	42 BLACKSMITH DR	SCO POST CAROS	\$185.41	
3/26/21	HILARY BRUEL	87 THORNTON RD 2000 DOOR HANGE	2000 OOCH HANGER	\$257.03	
3/27/21	EL12ABETH LEE	42 BLACKSMITH DR	POSTCARO MAILAGE	\$275.00	
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	DING LIABILITIES (ALL)	\$1017.44	

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